



UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF PENNSYLVANIA

GERHARD SWEETMAN

11 740 4

(In the space above enter the full name(s) of the plaintiff(s).)

- against -

BORO OF NORRISTOWN PA

COMPLAINT

Jury Trial: ☒ Yes ☐ No

(check one)

COUNTY OF MONTGOMERY PA

STATE OF PA

LANDLORD(S)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name	<u>GERHARD SWEETMAN</u>
	Street Address	<u>420 W MAIN ST APT # 1</u>
	County, City	<u>MONTGOMERY, NORRISTOWN</u>
	State & Zip Code	<u>PA 19401</u>
	Telephone Number	<u>610 272 6043</u>

- B. List all defendants. You should state the full name of the defendants, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant can be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name BORG OF NORRISTOWN PA
 Street Address _____
 County, City _____
 State & Zip Code _____

Defendant No. 2

Name COUNTY OF MONTGOMERY
 Street Address _____
 County, City _____
 State & Zip Code _____

Defendant No. 3

Name STATE OF PA
 Street Address _____
 County, City _____
 State & Zip Code _____

Defendant No. 4

Name LANDLORD(S)
 Street Address _____
 County, City _____
 State & Zip Code _____

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

- A. What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal Questions ☐ Diversity of Citizenship

- B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? 4TH ADMENDMENT + CIVIL & CRIMINAL ACTIONS

- C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship _____

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. Where did the events giving rise to your claim(s) occur? 400 W MAIN ST APT #1
NORRISTOWN PA 19401

- B. What date and approximate time did the events giving rise to your claim(s) occur? 4TH DEC 2009

- C. Facts: ATTEMPTED APARTMENT INVASION &
TERRISTIC THREATS TO MYSELF & ?

What
happened
to you?

Who did
what?

Was
anyone
else
involved?

Who else
saw what
happened?

NORRISTOWN
CODE ENFORCEMENT ATTEMPTED ENTRY

YES 3 OTHERS WORKERS NORRISTOWN BORO
LANDLORD

3 OTHERS

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

THREATS CAUSED HEART ATTACK
LATER REQUIRING INSTALL OF PACEMAKER

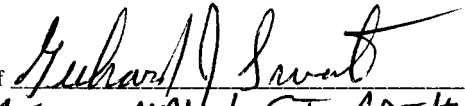
V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

- ① CLASS ACTION FOR ALL PA RENTERS
PREVENTING "SEARCHES" "INSPECTIONS" OF OUR
APARTMENTS
- ② CRIMINAL CHARGES FOR ACTIONS
- ③ COSTS + DAMAGES
- ④ APPOINT ATTORNEY FOR "RENTERS"

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 30 day of NOV, 20 11.

Signature of Plaintiff 
Mailing Address 400 W MAIN ST APT #1
NORRISTOWN PA 19401
Telephone Number 610 272 6043
Fax Number (if you have one) _____
E-mail Address GARY400@COMCAST.NET

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this _____ day of _____, 20____, I am delivering this complaint to prison authorities to be mailed to the Clerk's Office of the United States District Court for the Eastern District of Pennsylvania.

Signature of Plaintiff: _____
Inmate Number _____